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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Academy of Dermatology Association Political Action Committee 1350 I St NW ADDRESS (number and street) Ste 870 Check if different than previously Washington DC 20005 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00359539 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 09 0 1 2008 09 3 0 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Steven Debnar Type or Print Name of Treasurer Electronically Filed by Steven Debnar 10 07 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Academy of Dermatology Association Political Action Committee D D " D 0.9 0 1 2008 0.9 3 0 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2008 285970.34 January 1 (b) Cash on Hand at 257716.02 Begining of Reporting Period 12434.00 186781.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 270150.02 472751.34 6(a) and 6(c) for Column B) 81368.95 283970.27 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 188781.07 188781.07 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

American Academy of Dermatology Association Political Action Committee

0 1 3^D0 М М м м 0 9 2008 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 160732.00 9800.00 (i) Itemized (use Schedule A) 2634.00 24049.00 (ii) Unitemized (iii) TOTAL (add 12434.00 184781.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 2000.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 12434.00 186781.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 12434.00 186781.00 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 12434.00 186781.00

(subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	269.05	4070.27
	Expenditures(c) Total Operating Expenditures	368.95	4970.27
	(add 21(a)(i), (a)(ii) and (b))	368.95	4970.27
2.	Transfers to Affiliated/Other Party Committees	0.00	0.00
3.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	81000.00	279000.00
4.	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))	0.00	0.00
	(use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
წ .	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	man Political Committees		
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) i caciai criaie		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,	04000.05	22222
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	81368.95	283970.27
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	04000.05	000070 07
	from Line 31)	81368.95	283970.27

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	12434.00	186781.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	12434.00	186781.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	368.95	4970.27
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	368.95	4970.27

FE6AN026

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Dermatology As	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Scott D. Bennion Mailing Address Ste 400 2546 E 2nd St City Casper FEC ID number of contributing federal political committee. Name of Employer Central Wyoming Skin Clinic Receipt For: Primary General Other (specify)	State WY C Occupatio Physicia Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ В.	Full Name (Last, First, Middle Initial) John Q. Binhlam Mailing Address Ste 120 10 Cadillac Dr City Brentwood FEC ID number of contributing federal political committee. Name of Employer Advanced Skin & Laser Center Receipt For: Primary General Other (specify)	State TN C Occupatio Physicia Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ C.	Full Name (Last, First, Middle Initial) Clarence W. Brown Mailing Address Ste 264 1725 W Harrison St City Chicago FEC ID number of contributing federal political committee. Name of Employer Rush Univ. Med. Ctr. Receipt For: Primary General Other (specify)	State IL C Occupatio Physicia Aggregate		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of			1750.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per the name and address of any political committee	
American Academy of Dermatology	Association Political Action Committee	
Full Name (Last, First, Middle Initial) Scott A. Collins		Date of Receipt
Mailing Address Ste A 10215 SW Hall Blvd		09 11 2008
City	State Zip Code	Transaction ID: c0183f82432a93c62
<u>Tigard</u>	OR 97223-8809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Self Employed	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Jeffrey J. Crowley		Date of Receipt
Mailing Address Ste 101 5101 Commerce Dr		09 / 21 / Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: BD931D5D-C074-43
Bakersfield	CA 93309-0412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Bakersfield Dermatology	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) John D. DeSpain	1	Date of Receipt
Mailing Address 1800 Glenbrook Ct		09 / 22 / 2008
City	State Zip Code	Transaction ID: 3d843d9ad8d32c9f3
Columbia	MO 65203-5341	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Self Employed	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional		1800.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions
	American Academy of Dermatology A	Association F	olitical Action Committee	
Α.	Full Name (Last, First, Middle Initial) Roger S. Golomb Mailing Address 1122 Druid Rd E			Date of Receipt
				09 11 2008
	City Clearwater	State FL	Zip Code 33756-4100	Transaction ID: f4f635f5237f0c697ca Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self Employed	Occupation		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Barbara Greenan			Date of Receipt
	Mailing Address Ste 870 1350 I St NW			09 11 2008
	City	State	Zip Code	Transaction ID: f26ec6437c1df450883
	Washington FEC ID number of contributing federal political committee.	C	20005-3387	Amount of Each Receipt this Period 250.00
	Name of Employer Association Management	Occupation Physicia		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
C.	Full Name (Last, First, Middle Initial) Ronald A. Henrichs			Date of Receipt
	Mailing Address 930 E Woodfield Rd			09 11 2008
	City	State	Zip Code	Transaction ID: 9edc075032b936f1686
	Schaumburg FEC ID number of contributing federal political committee.	C	60173-4729	Amount of Each Receipt this Period 1000.00
	Name of Employer American Academy of Derma- tology	Occupation Associate	on ion Management	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional) .			1750.00
	TOTAL This Period (last page this line number			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 26 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Academy of Dermatology A	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	/	ASSOCIATION F	Offical Action Committee	
A.	Full Name (Last, First, Middle Initial) Janet G. Hickman			Date of Receipt
	Mailing Address Ste 101 1330 Oak Ln			09 02 2008
	City	State	Zip Code	Transaction ID: 7D3D1AE9-BE9B-48D1
	Lynchburg	VA	24503-2513	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Dermatology Consultants,	Occupatio Physicia		
	Inc. Receipt For:	- t - t	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) Carl A. Johnson			Date of Receipt
	Mailing Address 2610 Blossom St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 6A5CF52B-BDA5-4829-
	Columbia	SC	29205-2308	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self Employed	Occupatio Physicia		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	250.00	
C.	Full Name (Last, First, Middle Initial) Alfred L. Knable	1		Date of Receipt
	Mailing Address 1301 Riddle Rd			09 11 2008
	City	State	Zip Code	Transaction ID: 493d75c2b1ddcfe7f9e
	New Albany	IN	47150-5248	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Associates In Dermatology	Occupatio Physicia		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	250.00	
	SUBTOTAL of Receipts This Page (optional) .			1000.00
	TOTAL This Period (last page this line numbe		<u> </u>	

SCHEDULE A (FEC FITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other NAME OF COMMITTEE (In F	than using the name and a full)	ay not be sold or used by any persoddress of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle J. M. Knight Mailing Address 300 E Ha City Orlando FEC ID number of contributing federal political committee. Name of Employer Knight Dermatology Institute	State FL Occupati Dermate	ologist	Date of Receipt M M M
Receipt For: Primary Gener Other (specify) ▼		te Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Mark Lebwohl Mailing Address Apt 2505 300 E 85t City New York FEC ID number of contributing federal political committee. Name of Employer Mount Sinai School of Medicine Receipt For: Primary Gener Other (specify)	h St State NY C Occupati Physicia Aggrega		Date of Receipt M M M
Full Name (Last, First, Middle Joseph M. Malters Mailing Address 10685 La City Rolla FEC ID number of contributing federal political committee.	rson Ln State MO	Zip Code 65401-8108	Date of Receipt M M
Name of Employer The Dermatology Center Receipt For: Primary Gener Other (specify) ▼			
SUBTOTAL of Receipts This Pa	ge (optional)		2250.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 26 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usi NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person the name and address of any political committee to gy Association Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Daniel C. Rabb Mailing Address 974 S Enota Dr N City Gainesville	State Zip Code GA 30501-2429	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Dermatology Associates of NE Georgia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Sabra Sullivan Mailing Address Ste 606 501 Marshall St		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Jackson FEC ID number of contributing federal political committee.	State Zip Code MS 39202-1650	Transaction ID: 29a7d81cfca03ee455f Amount of Each Receipt this Period 500.00
Name of Employer Dermatology Associates, LLC Receipt For: Primary General	Occupation Physician Aggregate Year-to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Latha S. Vellanki	300.00	Date of Receipt
Mailing Address 642 Madison Ave		0 9 1 1 1 2 0 0 8
City Helena	State Zip Code MT 59601-2760	Transaction ID: c118c68565cfb50be34 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Helena Dermatology & Laser Clinic	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	nal)	1250.00
TOTAL This Period (last page this line nu	umber only)	9800.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			IE NUMBER: nly one)	PAGE 12/26
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	_ I —	21b 27	22 23 28a 28	\square \square \square
Any Information copied from such Reports and Sta or for commercial purposes, other than using the r					
NAME OF COMMITTEE (In Full)					
American Academy of Dermatology As	sociation Political Action Co	mmiti	tee		
Full Name (Last, First, Middle Initial) American Express				Date of Disbu	ID: V61112-08242434263 ursement
Mailing Address PO Box 53852				0 9	08 2008
City Phoenix	State Zip Code AZ 85072-3852			Amount of Ea	ach Disbursement this Period
Purpose of Disbursement Amex Fees		-	01		174.00
Candidate Name			egory/ /pe		
Office Sought: House Disb Senate President	ursement For: Primary General Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial) Merchant Services				Date of Disbu	
Mailing Address PO Box 6603				09 /	$\begin{bmatrix} 0 & 0 & 4 \end{bmatrix}$ $\begin{bmatrix} Y & Y & Y & 0 & 0 & 8 \end{bmatrix}$
City Hagerstown	State Zip Code MD 21741-6603			Amount of Ea	ach Disbursement this Period
Purpose of Disbursement Contribution		0	01	<u> </u>	157.32
Candidate Name		Cate	egory/ vpe		
Office Sought: House Disb Senate President	ursement For: Primary General Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial) Merchant Services				Date of Disbu	
Mailing Address PO Box 6603				0 9 1	10 Y 2008
City Hagerstown	State Zip Code MD 21741-6603			Amount of Ea	ach Disbursement this Period
Purpose of Disbursement MC Fees		Q	01	<u> </u>	37.63
Candidate Name			egory/ vpe		
Office Sought: House Disb Senate President	ursement For: Primary General Other (specify)		<u>-</u>		
State: District:					
SUBTOTAL of Disbursements This Page (option	nal)				368.95
	only)		•		368.95

,-		Use separate schedule(s	s))K LINE reck only					IGL	13 / 26	<u> </u>
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		À	21b 27	22 28a	X 23	3b	24 28c		25 29	2 3
	y Information copied from such Reports and State for commercial purposes, other than using the nan											
Λ	NAME OF COMMITTEE (In Full)											
V	American Academy of Dermatology Asso	ciation Political Action C	omm	nitte	ee							
	Full Name (Last, First, Middle Initial) Andy Harris for Congress						action of Disb		66370 nent)-951	9159 ⁻	1978
	Mailing Address PO Box 1527					0 ^M 9	M /	^D 2 2) / \	ź	8 ŏ o	Y
	City Annapolis	State Zip Code MD 21404				Amou	nt of E	ach D	isburse	ement	this Pe	eriod
	Purpose of Disbursement Contribution			01	1					200	00.00	
	Candidate Name Andrew P. Harris			ateg Typ	ory/ e							
	Office Sought: X House Senate President State: MD District: 01	ement For: 2008 Primary X General Other (specify) ▼	•									
_	Full Name (Last, First, Middle Initial)					Trans	action	ID:	31327	7_228	2068 [.]	1333
	Anna Eshoo for Congress					Date of	of Disb	ursem	nent			
	Mailing Address 555 Capitol Mall, Suite 1425					0 9		1 8		2 (8 Ó 0	
	City Sacramento	State Zip Code CA 95814				Amou	nt of E	ach D	isburse			erioc
	Purpose of Disbursement Contribution			01	1	L.	-		•	100	00.00	
	Candidate Name Anna G. Eshoo			ateg Typ	ory/ e							
	Office Sought: X House Senate President State: CA District: 14	ement For: 2008 Primary X General Other (specify)	•									
	Full Name (Last, First, Middle Initial) Baker for Congress						action of Disb	ursem		2-766	15542	217
	Mailing Address PO Box 312					0 9	M /	27		ž	0 Ď 8	Y
	City Columbia	State Zip Code MO 65205				Amou	nt of E	ach D	isburse	ement	this Pe	erioc
	Purpose of Disbursement Contribution			01	1		-			100	00.00	
	Candidate Name Judy Baker			ateg Typ	ory/ e							
	Office Sought: X House Senate President Disburs	ement For: 2008 Primary X General Other (specify) ▼	1									
	State: MO District: 09											

	CHEDULE B (FEC Form 3X)	Use separate schedule(s	2) -	NUMBER: PAGE 14/26
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	y one) 22
			27	28a 28b 28c 29 3
	y Information copied from such Reports and Sta for commercial purposes, other than using the n			
\setminus	NAME OF COMMITTEE (In Full)	,,		
\rangle	American Academy of Dermatology Ass	ociation Political Action C	Committee	
	Full Name (Last, First, Middle Initial) Boyd for Congress			Transaction ID: 53230-00016421079 Date of Disbursement
	Mailing Address PO Box 15703 PO Box 15703			0 9 M / D 1 9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Tallahassee	State Zip Code FL 32317		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution		011	2500.00
	Candidate Name F. Allen Boyd, Jr.		Category/ Type	
	Office Sought: X House Disbut Senate President	rsement For: 2008 Primary X General Other (specify)		
	State: FL District: 02			
	Full Name (Last, First, Middle Initial) Coleman for Senate 08			Transaction ID: 31327-75956362485 Date of Disbursement
	Mailing Address 680 Transfer Road Su	ite A		$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
	City St Paul	State Zip Code MN 55114		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution		011	2500.00
	Candidate Name Norm Coleman		Category/ Type	
	X Senate President	rsement For: 2008 Primary X General Other (specify)		
	State: MN District: Full Name (Last, First, Middle Initial)			Transaction ID: 31327-2983819842
	Collins for Senator			Date of Disbursement
	Mailing Address PO Box 1096			09 / 16 / 2008
	City Bangor	State Zip Code ME 04402		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution		011	5000.00
	Candidate Name Susan M. Collins		Category/ Type	
		rsement For: 2008 Primary X General		
	X Senate President	Other (specify)		
	<u> </u>	Other (specify)		

		Use separate schedule(s	5))K LINE ieck only		:H:			PAG	E 15/	26
Π _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	X	23 28b	\square	24 28c	25 29	2 3
	y Information copied from such Reports and State for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) American Academy of Dermatology Asso	e and address of any politica	al com	nmitt	ee to sol							6
<u>V</u> 	Full Name (Last, First, Middle Initial) Committee To Elect Chris Murphy Mailing Address PO Box 127					Date		sburs	: 53 ement		362575 2 0 0 8	
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	Full Name (Last, First, Middle Initial) Committee To Re-Elect Artur Davis To Co Mailing Address PO Box 1845	ongress, the				Date		sburs	: 63 ement		'17083 Ž 0 0 8	
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	Full Name (Last, First, Middle Initial) Congressman Bart Gordon Committee					Date		sburs			7630273 Ž 0 Č 8	
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<u> </u>	Full Name (Last, First, Middle Initial) Dnc Services Corporation/Democratic Na	ional Committee		Transaction ID: 26393-02367800474 Date of Disbursement
	Mailing Address 430 S. Capitol Street SE	:		09
	City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
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	Senate President	Primary General Other (specify)		
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	Mailing Address PO Box 270701			09 16 7 2008
	City West Hartford	State Zip Code CT 06127		Amount of Each Disbursement this Period
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	Candidate Name Christopher J. Dodd		Category/ Type	
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	Mailing Address 1029 North Royal Street	2nd Fl				0 9		2	2 ^D	L.	ž 0 ŏ 8	3
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<u> </u>	Full Name (Last, First, Middle Initial) Jeanne Shaheen for Senate					Date	saction of Disk	ourser	3132 nent		0 0 8	
	Mailing Address PO Box 1510					0.9		1			000	
	City Manchester	State Zip Code NH 03105				Amou	int of E	ach [Disburs	ement	this P	eriod
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	Mailing Address PO Box 3016					0 9		^D 2(5	2	0 ŏ 8	
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	Full Name (Last, First, Middle Initial) John Sullivan for Congress Inc						saction of Disk	ourser		7-382	21832	537
	Mailing Address Post Office Box 47084	0				0 9	M /	^D 1	7 /	y ž	0 ŏ 8	Y
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American Academy of Dermatology Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Initial)		Transaction ID: 53230-6142541766
Kirk for Congress		Date of Disbursement 0 9 2 3 2 0 0 8
Mailing Address PO Box 8		0 9 2 3 2 0 0 8
City Winnetka	State Zip Code IL 60093	Amount of Each Disbursement this Period
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Candidate Name Mark Steven Kirk	Category/	
	Type sement For: 2008 Primary X General Other (specify)	
Full Name (Last, First, Middle Initial) Kpac		Transaction ID: 42478-5791589617 Date of Disbursement
Mailing Address PO Box 820365		09 9 7 23 7 2008
City Dallas	State Zip Code TX 75382	Amount of Each Disbursement this Period
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Senate	ement For: 2008 Primary General Other (specify) oution	
Full Name (Last, First, Middle Initial) Lisa Murkowski for Us Senate		Transaction ID: 31327-1913873553 Date of Disbursement
Mailing Address PO Box 100847		09 9 7 7 7 7 2 0 0 8
City Anchorage	State Zip Code AK 99510	Amount of Each Disbursement this Period
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Candidate Name Lisa A. Murkowski	Category/ Type	
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<u></u>	Full Name (Last, First, Middle Initial) Pat Roberts for U S Senate Inc				Transaction ID: 63492-5854913592. Date of Disbursement M
	Mailing Address PO Box 433				$ \begin{bmatrix} M & M \\ 0 & 9 \end{bmatrix} / \begin{bmatrix} D & 2 & 7 \\ 2 & 7 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix} $
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	Pat Roberts			Type	_
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	State: KS District: Full Name (Last, First, Middle Initial)				Transaction ID: 32446-6951562762
	People for Patty Murray U S Senate Cam	paign			Date of Disbursement
	Mailing Address PO Box 3662				09 / 23 / 2008
	City Seattle	State Zip Code WA 98124			Amount of Each Disbursement this Period
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	Candidate Name Patty Murray		1	ategory/ Type	
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	Full Name (Last, First, Middle Initial) Price for Congress				Transaction ID: 31327-9447900652 Date of Disbursement
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	City Roswell	State Zip Code GA 30077			Amount of Each Disbursement this Period
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	Candidate Name Thomas E. Price			ategory/ Type	
	Office Sought: X House Senate President Disburs	sement For: 2008 Primary X General Other (specify)	•		
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<u>V</u>	Full Name (Last, First, Middle Initial) Red Pac					Date	of Dis	burse	ment		26636	
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	Full Name (Last, First, Middle Initial) Steve Israel for Congress Committee					Date	of Dis	burse	ment		52936	
	Mailing Address PO Box 777					0 ^M 9	M /	^D 2	5 ′		ž 0 ŏ 8	
	City Deer Park	State Zip Code NY 11729				Amou	int of I	Each	Disbur	rseme	nt this P	erio
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Full Name (Last, First, Middle Initial)					Trans	acti	on ID:	31327	7-67:	36108	66069
Tim Johnson for South Dakota Inc						_	sburse				
Mailing Address PO Box 1536					0 ^M 9	M /	^D 1	8 /	ž	0 0 8	Y
City Sioux Falls	State Zip Code SD 57101				Amou	nt of	Each	Disburse	emen	t this F	eriod
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Candidate Name Tim Johnson		Cat T	tego Type								
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City Pttsburgh	State Zip Code PA 15234				Amou	nt of	Each	Disburse	emen	t this F	eriod
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Udall for Colorado						_	sburse				
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	American Academy of Dermatology Ass	ociation Political Action Com	ımittee	
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	Mailing Address 3311 Candelaria NE S	uite A		09 0 1 8 7 2 0 0 8
	City Albuquerque	State Zip Code NM 87107		Amount of Each Disbursement this Period
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	Candidate Name Tom Udall		Category/ Type	
	Office Sought: House Disbu	rsement For: 2008		
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